									Application or Docket Number				
	PATENT	APPLICATION Effect		10 7	7	37	93						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF	OTHER SMALL		
TOTAL CLAIMS			5			•	ſ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER	FILED	NUM	BER EXTRA		BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			5 (minus 20=		. 3]		ı	XS 9=		OR	X\$18=	558	
INDEPENDENT CLAIMS			() m	inus 3 =	1			X43=		OR	X86=	688	
MULTIPLE DEPENDENT CLAIM PRESENT					. 6		Ì	+145=		OR	÷290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	طامح	
J.	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALI	LENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	:31	Minus	-5	<u>/</u> .	=		XS 9=		OR	X\$18=		
	Independent	· 6	Minus	<u> </u>	/	<u> -</u>		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1 145=		OR	+290=		
·								TOTA			TOTAL		
(Column 1) (Column 2) (Column 3)									E	1011	AODIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		- ·		XS 9=		OR	X\$18=		
ME	Independent	•	Minus	***		=		X43=	,		X86=		
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
	•						L	+145=		OR	+290=		
•								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)		•				,	
AMENDMENT C	•	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= ,	T	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		п	 	X43=		ı	X86=		
<u>ح</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 	OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE "TOTAL ADDIT. FEE										OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					fount	d in the ap	opropriate box	in colu	ımn 1.		